IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
Ronald D. BLUM et al.)	Group Art Unit: Unassigned
Application Number: 10/637,210)	Examiner: Unassigned
Filed: August 8, 2003)	
Title: ELECTRO-ACTIVE CONTACT LENS SYSTEM))	

CERTIFICATE OF EXPRESS MAILING UNDER 37 C.F.R. §1.10

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as Express Mail in an envelope addressed to:

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on <u>November 6, 2003</u>

Date

Laura A. Couch

Typed or printed name of person signing Certificate

Documents being submitted with this Certificate of Express Mailing include:

- Response Transmittal Letter
- Preliminary Amendment
- Self Addressed Stamped Return Postcard

HUNTON & WILLIAMS Riverfront Plaza, East Tower 951 East Byrd Street Richmond, VA 23219 (804) 788-8200 (Telephone) (804) 788-8218 (Facsimile)



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PRELIMINARY AMENDMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Prior to examination of the above-referenced application, please enter the following preliminary amendment which begins on page 2 of this paper, followed by the remarks which begin on page 3.

11-67-03



Attorney Docket No. 63049.000070 Attorney Customer No. 27682

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Ronald	d D. BL	UM et al.) Group Art Unit: Unassigned	
Applic	ation N	Tumber: 10/637,210) Examiner: Unassigned	
Filed:	Augus	t 8, 2003)	
Title:	ELEC' SYST	TRO-ACTIVE CONTACT LENS EM))	
		RESPONSE TRANSM	MITTAL LETTER	
P.O. B	ox 145	r for Patents 0 Girginia 22313-1450		
	Enclos	sed is a Preliminary Amendment in	connection with the above-identified pa	atent
applic	ation.			
	[]	A petition for Extension of Time is	also enclosed.	
	[]	Also enclosed is	·	
	[]	A copy of the Change of Power of A and Statement Under 37 C.F.R. 3.73	Attorney, Change of Correspondence Address (b) as filed on	ess
	[X]	No additional claim fee is required.		
	[]	An additional claim fee is required,	and is calculated as shown below:	

CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	25	Minus 25 =		x \$18.00 =	0
Independent Claims	3	Minus 3 =		x \$86.00 =	0
If Amendment adds multiple dependent claims, add \$260.00				0	
Total Amendment Fee			0		
If small entity status is claimed, subtract 50% of Total Amendment Fee			0		
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT				\$0	

- P	[]	Charge \$	Deposit Account No	o. 08-3436 for the fee due
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- [] A check in the amount of \$_____ is enclosed for the fee due.
- [X] A Certificate of Express Mailing Under 37 C.F.R. §1.10.
- [X] Self-addressed stamped postcard.

[X] The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §1.16, 1.17 and 1.21 that may be required by this paper to Deposit Account No. 08-3436.

Date: November 6, 2003 Respectfully submitted,

Shawn K. Leppo Reg. No. 50,311

Please direct all correspondence to: J. Michael Martinez de Andino HUNTON & WILLIAMS Riverfront Plaza, East Tower 951 East Byrd Street Richmond, VA 23219

Tel: (804) 788-7216 Fax: (804) 343-4549